Rec'd PCT/PTO 20 MAY 2005 10/535641

PTC/SB/80 (11-04)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

<u> </u>	. 0.7 0(0).	evious powers of attorne	y given in the	application identif	fied in the attached stat	tement under
I nereby	y appoint:					
Î	actitioners associa	ated with the Customer Numbe	ır:	24737		
OR		_				
L_J Pra	actitioner(s) name	d below (if more than ten pater	nt practitioners an	e to be named, then a	customer number must be u	rsed):
		Name	Registration Number		Name	Registration Number
						Hanner
			 			
			 	3		
\vdash			 	8	······································	
. -			 			
		o represent the undersigned be ons assigned only to the undersordance with 37 CFR 3.73(b).	fore the United Signed according	tates Patent and Trade to the USPTO assignr	emark Office (USPTO) in co ment records or assignment	nnection with documents
		ondence address for the applica	ation identified in	the attached statemen		
			auch identified	The attached statemen	Ti under 37 CFR 3.73(b) to:	
X -	The and duage and a		1 ,	24737		
OR		clated with Customer Number:		4/3/	\searrow	
1 1	m or ividual Name				/ 	
Address	Widdat Wallie				·	
City	}		State		Zip	
Country						
Telephon	ne l			Fax		
L						
Assignee N	lame and Addres	s:				
		ZOUTN	WT T TWO D			
					CTRONICS N.V.	
Groenewoudseweg l 5621 BA Eindhoven, The Netherlands						
A copy of	f this form, tog	ether with a statement un	ider 37 CFR 3.7	73(b) (Form PTO/S	B/96 or equivalent) is re	equired to be
the pract	itioners appoin	in which this form is use nted in this form if the app	d. The statem	ient under 37 CFR	3.73(b) may be complet	ed by one of
and must	Identify the a	oplication in which this Po	ower of Attorno	ev is to be filed.	to act on benait of the	assignee,
			ATURE of Assign			
	The div	idual whose signature and title	is supplied belo	w is authorized to act	on behalf of the assignee	1
Signature	Me	Kafe. He	aur	,	Date 14 Januar	ry 2005
Name	Michael	E. Marion		····	Telephone (914)	333-9637
Title	Authori	zed Representa	tive		1 (722)	

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Rec'd PCT/PTO

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

20 MAY 200 ATTORNEY'S DOCKET NUMBER PHDE020284 US

As a below named inventor, I h	ereby declare that:			
My residence, post office addre	ess and citizenship are as stat	ed next to my name.	0/535641	
	of the subject matter which is osure member comprising	name is listed below) or an origina claimed and for which a patent is a feed-through		
is attached hereto.				
☐ was filed as United States a	pplication			
Serial No ————				
on				
and was amended				
on				
X was filed as PCT internation	nal application			
Number PCT/IB2003/				
on November 14				
OII -				
and was amended under PCT	Article 19			
on			(if applicable).	
I hereby state that I have review claims, as amended by any am		nts of the above-identified specifi	cation, including the	
I acknowledge the duty to discle Title 37, Code of Federal Regu		rial to the examination of this app	lication in accordance with	
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:				
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIORI	TY CLAIMS UNDER 35 U.S.C. 1	19:	
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119	
Europe	021 02 638.0	November 25, 2002	YES	
	<u> </u>			

Combined Declaration For Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications) Attorneys Docket Number PHDE020284 US						
				the following attorney(s) and/on. (List name and registration no		secute this application and transact
	3	Jack E. Haken, R Michael E. Marion, Edward M. Blocker	Reg. No. 32.2	66	Direct Telephor (name and tele (914)332-02	phone number)
40	FULL NAME OF INVENTOR	FAMILY NAME GOOTZEN		FIRST GIVEN NAME Albert		SECOND GIVEN NAME
201	RESIDENCE & CITIZENSHIP	Geldrop	NLX	STATE OR FOREIGN COUNTIES THE Netherlands	NTRY	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDR	RESS	5663 TG Geldrop		STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME BOLECH		FIRST GIVEN NAME Mark		SECOND GIVEN NAME
202	RESIDENCE & CITIZENSHIP	CITY Utrecht		STATE OR FOREIGN COUNTY The Netherlands	TRY	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Achter Sint Pieter 4-K		3512 HS Utrecht		The Netherlands
	FULL NAME OF INVENTOR	STRAETMAN	S	FIRST GIVEN NAME Jean-Sebastien		SECOND GIVEN NAME
203	RESIDENCE & CITIZENSHIP	CITY Aachen		Germany CITY 52066 Aachen		COUNTRY OF CITIZENSHIP France
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Oppenhoffallee 9				STATE & ZIP CODE/COUNTRY Germany
	FULL NAME OF INVENTOR	FAMILY NAME CILLESSEN		FIRST GIVEN NAME Johannes		SECOND GIVEN NAME F. M.
204	RESIDENCE & CITIZENSHIP	Deurne		STATE OR FOREIGN COUNTIES THE Netherlands	ITRY	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	Post office addr Peellandsinge		5754 GD Deurne		STATE & ZIP CODE/COUNTRY The Netherlands
true: a impris applic	and further that these onment, or both, unc ation or any patent is	e statements were made der section 1001 if Title ssuing thereon.	with the knowledg	ge that willful false statements a	and the like so ma	ormation and belief are believed to be ade are punishable by fine or s may jeopardize the validity of the
SIGN	ATURE OF INVENT	OR 201	SIGNATURE OF	FINVENTOR 202	SIGNATU	JRE OF INVENTOR 203
DATE	21.11.2003		DATE		DATE	
SIGNA	ATURE OF INVENTO	OR 204				

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHDE020284 US

As a below named inventor, I h	nereby declare that:		
My residence, post office addre	ess and citizenship are as state	ed next to my name.	
	of the subject matter which is opening	name is listed below) or an original, firs claimed and for which a patent is soug a feed-through	
is attached hereto.			
was filed as United States a	application		
Serial No ————			
on			
and was amended			
on			
X was filed as PCT internation	nal application		
Number PCT/IB2003/			
on November 14			
OII			
and was amended under PCT	Article 19		
on			(if applicable).
I hereby state that I have review claims, as amended by any am		nts of the above-identified specification	n, including the
I acknowledge the duty to discle Title 37, Code of Federal Regu		rial to the examination of this application	on in accordance with
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:			
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIORI	TY CLAIMS UNDER 35 U.S.C. 119:	
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	021 02 638.0	November 25, 2002	YES

(includ	les Reference to PC	T International Application	ons)	er of Attorney (Continue		Attorneys Docket Number PHDE020284 US
				the following attorney(s) and/on. (List name and registration r		rosecute this application and transact
		Jack E. Haken, Ro Michael E. Marion, Edward M. Blocker,	Reg. No. 32,2	66	Direct Teleph (name and te (914)332-0	lephone number)
•	FULL NAME OF INVENTOR	FAMILY NAME GOOTZEN	Reg. No. 30,2	FIRST GIVEN NAME Albert		SECOND GIVEN NAME
201	RESIDENCE & CITIZENSHIP	Geldrop		STATE OR FOREIGN COU The Netherlands	NTRY	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRI	ESS	5663 TG Geldrop		STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME BOLECH		FIRST GIVEN NAME Mark STATE OR FOREIGN COU	NTDV	SECOND GIVEN NAME
202	RESIDENCE & CITIZENSHIP POST OFFICE	Utrecht POST OFFICE ADDRI	ЙΓX	The Netherlands	NIKY	COUNTRY OF CITIZENSHIP The Netherlands STATE & ZIP CODE/COUNTRY
	ADDRESS	Achter Sint Pi		3512 HS Utrecht		The Netherlands
	FULL NAME OF INVENTOR	STRAETMANS	8	Jean-Sebastien STATE OR FOREIGN COU	NTDV	COUNTRY OF CITIZENSHIP
203	RESIDENCE & CITIZENSHIP POST OFFICE	Aachen POST OFFICE ADDR	=00	Germany CITY	NIKI	France STATE & ZIP CODE/COUNTRY
	ADDRESS	Oppenhoffalle FAMILY NAME		52066 Aachen		Germany SECOND GIVEN NAME
•••	FULL NAME OF INVENTOR RESIDENCE &	CILLESSEN		Johannes STATE OR FOREIGN COU	NITOV	F. M. COUNTRY OF CITIZENSHIP
204	CITIZENSHIP POST OFFICE	Deurne POST OFFICE ADDR	Tee	The Netherlands	NIKI	The Netherlands STATE & ZIP CODE/COUNTRY
	ADDRESS	Peellandsinge		5754 GD Deurne		The Netherlands
true: a	nd further that these	e statements were made der section 1001 if Title 1	with the knowledge 8 of the United st	ge that willful false statements ates Code, and that such willfu	and the like so	nformation and belief are believed to be made are punishable by fine or nts may jeopardize the validity of the
SIGNA	ATURE OF INVENT	OR 201	SIZIVATRED	FINVENTOR 202	SIGNA	TURE OF INVENTOR 203
DATE			DATE 24.11	. 2003	DATE	
SIGNA	ATURE OF INVENT	OR 204				

DATE

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHDE020284 US

As a below named inventor. I hereby declare that: My residence, post office address and citizenship are as stated next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Crevice-less end closure member comprising a feed-through the specification of which (check only one item below): is attached hereto. was filed as United States application Serial No on and was amended X was filed as PCT international application PCT/IB2003/005185 Number ____ November 14, 2003 and was amended under PCT Article 19 (if applicable). I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a). I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed: PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119: COUNTRY APPLICATION NUMBER DATE OF FILING PRIORITY DAY, MONTH, YEAR CLAIMED UNDER 35 USC 119 Europe 021 02 638.0 November 25, 2002 YES

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)

POST OFFICE ADDRESS

Peellandsingel 78

POST OFFICE

ADDRESS

DATE

Attorneys Docket Number PHDE020284 US

STATE & ZIP CODE/COUNTRY

The Netherlands^{NTF}

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245 FULL NAME OF INVENTOR POST OFFICE ADDRESS ACITIZENSHIP POST OFFICE ADDRESS ADRESS ADRESS ADRESS ADRESS ADRESS ACITIZENSHIP POST OFFICE ADDRESS CITY The Netherlands FIRST GIVEN NAME FIRST GIVEN NAME Albert STATE OR FOREIGN COUNTRY The Netherlands The Netherlands The Netherlands The Netherlands SECOND GIVEN NAME The Netherlands The Netherlands SECOND GIVEN NAME SECOND GIVEN NAME FIRST GIVEN NAME BOLECH POST OFFICE ADDRESS CITY The Netherlands The Neth					Disast Tolopho	no Calla to:
FULL NAME OF INVENTOR FAMILY NAME FOST OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY The Netherlands SECOND GIVEN NAME SECOND GIVEN NAME SECOND GIVEN NAME STATE & ZIP CODE/COUNTRY The Netherlands SECOND GIVEN NAME STATE & ZIP CODE/COUNTRY The Netherlands SECOND GIVEN NAME STATE & ZIP CODE/COUNTRY STATE & ZIP CODE/COUNTRY The Netherlands SECOND GIVEN NAME SECOND GIV					(nome and talanhana number)	
FULL NAME OF FORTICE ADDRESS ACHER SITE OF FOREIGN COUNTRY The Netherlands STATE OF FOREIGN COUNTRY The Netherlands STATE & ZIP CODE/COUNTRY The Netherlands SECOND GIVEN NAME SECOND GIVEN NAME SECOND GIVEN NAME SECOND GIVEN NAME STATE & ZIP CODE/COUNTRY The Netherlands SECOND GIVEN NAME STATE & ZIP CODE/COUNTRY GERMANY GERMANY GERMANY GERMANY GERMANY STATE & ZIP CODE/COUNTRY GERMANY GERMANY GERMANY GERMANY GERMANY STATE & ZIP CODE/COUNTRY GERMANY GERMANY GERMANY GERMANY GERMANY GERMANY GERMANY GERMANY GERMANY STATE & ZIP CODE/COUNTRY GERMANY GERMAN						
201 RESIDENCE & CITY POST OFFICE ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ACITIZENSHIP POST OFFICE ADDRESS ACITIZENSHIP POST OFFICE ADDRESS ACITIZENSHIP POST OFFICE ADDRESS CITY ACITIZENSHIP POST OFFICE ADDRESS CITY ACHOR FIRST GIVEN NAME POST OFFICE ADDRESS ACHOR STATE AS ZIP CODE/COUNTRY The Netherlands SECOND GIVEN NAME The Netherlands The Nether		E		45	(811)602 62	
201 RESIDENCE & CITY						SECOND GIVEN NAME
CITIZENSHIP Geldrop The Netherlands The Netherlands		INVENTOR	GOOTZEN			
CITIZENSHIP POST OFFICE ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ACHTER ADDRESS ADDRESS ACHTER ADDRESS ACHTER ADDRESS ADDRESS ACHTER ADDRESS ACHTER ADDRESS ADDRESS ACHTER ADDRESS ADDRESS ACHTER ADDRESS ACHTER ADDRESS ADDRESS ADDRESS ACHTER ADDRESS ADDRESS ADDRESS ACHTER ADDRESS ADDRESS ACHTER ADDRESS ACHTER ADDRESS ADDRESS ACHTER ADR	201	RESIDENCE &	CITY		NTRY	
POST OFFICE ADDRESS Gloin 14 FULL NAME OF INVENTOR RESIDENCE & CITY DOST OFFICE ADDRESS ACHER SINT PIECE ADDRESS ACHER	201	CITIZENSHIP	Geldrop	The Netherlands		
FULL NAME OF INVENTOR POST OFFICE ADDRESS RESIDENCE & CITY Achter Sint Pieter 4-K POST OFFICE ADDRESS ACHTER SINE NAME FIRST GIVEN NAME FULL NAME OF INVENTOR RESIDENCE & CITY POST OFFICE ADDRESS ACHTER SINE PIET OFFIC		POST OFFICE		CITY		
FULL NAME OF INVENTOR RESIDENCE & CITY OUTrecht POST OFFICE ADDRESS Achter Sint Pieter 4-K POST OFFICE ADDRESS ACHTER SIDENCE & CITY Achter Sint Pieter 4-K POST OFFICE ADDRESS ACHTER SINT PIETER SINT PIET				5663 TG Geldrop		The Netherlands
INVENTOR BOLECH Mark		FULL NAME OF		FIRST GIVEN NAME		SECOND GIVEN NAME
RESIDENCE & CITY POST OFFICE ADDRESS ACHTER SINTERPORT OF FOREIGN COUNTRY The Netherlands CITY The Netherlands STATE & ZIP CODE/COUNTRY The Netherlands SECOND GIVEN NAME France COUNTRY OF CITIZENSHIP France STATE & ZIP CODE/COUNTRY Germany FULL NAME OF INVENTOR FULL NAME OF INVENTOR FULL NAME OF INVENTOR RESIDENCE & CITY RESIDENCE & CITY STATE OR FOREIGN COUNTRY FIRST GIVEN NAME Johannes F. M. COUNTRY OF CITIZENSHIP FIRST GIVEN NAME F. M. COUNTRY OF CITIZENSHIP The Netherlands The Netherlands The Netherlands COUNTRY OF CITIZENSHIP The Netherlands						
CITIZENSHIP Utrecht POST OFFICE ADDRESS Achter Sint Pieter 4-K FULL NAME OF INVENTOR RESIDENCE & CITY POST OFFICE ADDRESS Achter Sint Pieter 4-K STATE & ZIP CODE/COUNTRY The Netherlands CITY The Netherlands STATE & ZIP CODE/COUNTRY STATE & ZIP CODE/COUNTRY Germany France STATE & ZIP CODE/COUNTRY Germany France STATE & ZIP CODE/COUNTRY Germany France STATE & ZIP CODE/COUNTRY France STATE & ZIP CODE/COUNTRY Germany France STATE & ZIP CODE/COUNTRY GOUNTRY OF CITIZENSHIP The Netherlands	202	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY		
POST OFFICE ADDRESS Achter Sint Pieter 4-K FULL NAME OF INVENTOR RESIDENCE & CITY POST OFFICE ADDRESS Achter Sint Pieter 4-K FIRST GIVEN NAME Jean-Sebastien STATE & ZIP CODE/COUNTRY The Netherlands Der FIRST GIVEN NAME Jean-Sebastien SECOND GIVEN NAME JEAN-SEDBACE & CITY Achen France STATE & ZIP CODE/COUNTRY COUNTRY OF CITIZENSHIP France STATE & ZIP CODE/COUNTRY COUNTRY OF CITIZENSHIP France STATE & ZIP CODE/COUNTRY Germany France STATE & ZIP CODE/COUNTRY France STATE & ZIP CODE/COUNTRY Germany STATE & ZIP CODE/COUNTRY France STATE & ZIP CODE/COUNTRY Germany STATE & ZIP CODE/COUNTRY FRANCE STATE & ZIP CODE/COUNTRY FRANCE STATE & ZIP CODE/COUNTRY Germany STATE & ZIP CODE/COUNTRY STATE & ZIP CODE/COUNTRY GERMAN STATE & ZIP CODE/COUNTRY STATE & ZIP CODE/COUNTRY GERMAN STATE & ZIP CODE/COUNTRY COUNTRY OF CITIZENSHIP The Notherlands 1-P The Notherlands 1-P	202		Utrecht	The Netherlands		
ADDRESS Achter Sint Pieter 4-K FULL NAME OF INVENTOR RESIDENCE & CITY POST OFFICE ADDRESS ADDRESS FULL NAME OF INVENTOR POST OFFICE ADDRESS ADDRESS FULL NAME OF INVENTOR FULL NAME OF INVENTOR FULL NAME OF INVENTOR RESIDENCE & CITY Achen FOST OFFICE ADDRESS Oppenhoffallee 9 FULL NAME OF INVENTOR RESIDENCE & CITY FIRST GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME Johannes FULL NAME OF INVENTOR FULL NAME OF INVENTOR RESIDENCE & CITY STATE OR FOREIGN COUNTRY FIRST GIVEN NAME FIRST GI		POST OFFICE				
FULL NAME OF INVENTOR RESIDENCE & CITY POST OFFICE ADDRESS Oppenhoffallee 9 FULL NAME OF INVENTOR FIRST GIVEN NAME Jean-Sebastien STATE OR FOREIGN COUNTRY Germany France STATE & ZIP CODE/COUNTRY Germany FIRST GIVEN NAME France STATE & ZIP CODE/COUNTRY Germany FULL NAME OF INVENTOR FAMILY NAME FIRST GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME FRANCE STATE & ZIP CODE/COUNTRY Germany SECOND GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME JOHANNE FIRST GIVEN NAME FIRST GIVEN NAME GERMANY SECOND GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME GOUNTRY OF CITIZENSHIP The Nethorlands in Part of the Nathorlands in Part of the Nethorlands in Part of	1		Achter Sint Pieter 4-K	3512 HS Utrecht		
INVENTOR STRAETMANS Jean-Sebastien Irah STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP France STATE OR FOREIGN COUNTRY France STATE & ZIP CODE/COUNTRY Germany SECOND GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME F. M. SECOND GIVEN NAME F. M. SECOND GIVEN NAME F. M. STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP COUNTRY COUNTRY OF CITIZENSHIP COUNTRY	<u> </u>	FULL NAME OF		FIRST GIVEN NAME		SECOND GIVEN NAME US
203 RESIDENCE & CITY POST OFFICE ADDRESS Oppenhoffallee 9 FULL NAME OF INVENTOR RESIDENCE & CITY FULL NAME OF INVENTOR RESIDENCE & CITY RESIDENCE & CITY STATE & ZIP CODE/COUNTRY 52066 Aachen FIRST GIVEN NAME FIRST GIVEN NAME Johannes F. M. COUNTRY OF CITIZENSHIP The Notherlands 1/12	\$			Jean-Sebastien		
CITIZENSHIP Aachen Germany France POST OFFICE ADDRESS Oppenhoffallee 9 S2066 Aachen Germany FULL NAME OF INVENTOR CILLESSEN FAMILY NAME CILLESSEN STATE & ZIP CODE/COUNTRY GERMANY SECOND GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME F. M. SECOND GIVEN NAME F. M. STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP COUNTRY	702	RESIDENCE &	CITY	STATE OR FOREIGN COL	NTRY	COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS ADDRESS Oppenhoffallee 9 FULL NAME OF INVENTOR RESIDENCE & CITY POST OFFICE ADDRESS Oppenhoffallee 9 STATE & ZIP CODE/COUNTRY Germany SECOND GIVEN NAME FIRST GIVEN NAME Johannes STATE & ZIP CODE/COUNTRY FIRST GIVEN NAME FIRST GIVEN NAME F. M. COUNTRY OF CITIZENSHIP The Notherlands 1.15	203		200	Germany	_	
ADDRESS Oppenhoffallee 9 52066 Aachen Germany FULL NAME OF INVENTOR CILLESSEN FIRST GIVEN NAME 204 RESIDENCE & CITY STATE OR FOREIGN COUNTRY The Notherlands 1.15		POST OFFICE		CITY		STATE & ZIP CODE/COUNTRY
FULL NAME OF INVENTOR CILLESSEN 204 RESIDENCE & CITY FIRST GIVEN NAME Johannes F. M. COUNTRY OF CITIZENSHIP The Notherlands 1.12				52066 Aachen		Germany
INVENTOR CILLESSEN Johannes F. M. 204 RESIDENCE & CITY STATE OR FOREIGN COUNTRY COUNTRY The Notherlands 1.12	-	FULL NAME OF		FIRST GIVEN NAME		
204 RESIDENCE & CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP				Johannes		
The Notherlands 12	204	RESIDENCE &		STATE OR FOREIGN COL	INTRY	
	204			The Netherlands		The Netherlands

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

CITY

5754 GD Deurne

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203 ATT
DATE	DATE	DATE HIP 19.11.2003
SIGNATURE OF INVENTOR 204		NTE
		12.7 77355

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office T

(July 1994) effeved

> 3C 30 YEP!

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHDE020284 US

As a below named inventor, I h	ereby declare that:		
My residence, post office addre	ess and citizenship are as state	ed next to my name.	
	of the subject matter which is obsure member comprising	name is listed below) or an original, firs claimed and for which a patent is sougl a feed-through	
is attached hereto.			
☐ was filed as United States a	pplication		
Serial No			-
on			· · · · · · · · · · · · · · · · · · ·
and was amended			
on			
W was filed as DCT internation	al application		
Was filed as PCT internation	• •		
•			
on November 14	, 2003		
and was amended under PCT	Article 19		
on			(if applicable).
I hereby state that I have review claims, as amended by any am		nts of the above-identified specificatior	n, including the
I acknowledge the duty to disclo Title 37, Code of Federal Regul		rial to the examination of this application	n in accordance with
or inventor's certificate or of any States of America listed below a any PCT international application	y PCT international application and have identified below any on(s) designating at least one	States Code, § 119 of any foreign applin(s) designating at least one country ot foreign application(s) for patent or invector of the application(s) of which priority is clearly states of the application(s) of which priority is clearly states of the application(s).	her than the United entor's certificate or f America filed by me
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIORI	TY CLAIMS UNDER 35 U.S.C. 119:	
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	021 02 638.0	November 25, 2002	YES

	Att Deal of Mention
Combined Declaration For Patent Application and Power of Attorney (Continued)	Attorneys Docket Number
	DUDE 000004 110
(includes Reference to PCT International Applications)	PHDE020284 US
DOMED OF ATTORNEY, As a second investor I beach, association of the following effectively and/or agent/a) to propose	uta this application and trace

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

				 	
		Jack E. Haken, Reg. No. 26,90 Michael E. Marion, Reg. No. 32,2 Edward M. Blocker, Reg. No. 30,	266		phone Calls to: telephone number) !-0222
	FULL NAME OF INVENTOR	FAMILY NAME GOOTZEN	FIRST GIVEN NAME Albert	<u></u>	SECOND GIVEN NAME
201	RESIDENCE & CITIZENSHIP	CITY Geldrop	STATE OR FOREIGN COU The Netherlands	INTRY	The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Gloin 14	5663 TG Geldrop		STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	BOLECH	FIRST GIVEN NAME Mark		SECOND GIVEN NAME
202	RESIDENCE & CITIZENSHIP	Utrecht	STATE OR FOREIGN COUNTRY The Netherlands		The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Achter Sint Pieter 4-K	3512 HS Utrecht		STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME STRAETMANS	FIRST GIVEN NAME Jean-Sebastien		SECOND GIVEN NAME
203	RESIDENCE & CITIZENSHIP	Aachen	STATE OR FOREIGN COU Germany	INTRY	France
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Oppenhoffallee 9	52066 Aachen		STATE & ZIP CODE/COUNTRY Germany
	FULL NAME OF INVENTOR	FAMILY NAME CILLESSEN	FIRST GIVEN NAME Johannes		SECOND GIVEN NAME F. M.
204	RESIDENCE & CITIZENSHIP	Deurne \	STATE OR FOREIGN COU The Netherlands	INTRY	The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Peellandsingel 78	5754 GD Deurne		STATE & ZIP CODE/COUNTRY The Netherlands

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE

SIGNATURE OF INVENTOR 204

DATE

28.11.2003

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

10/535641 JC14 Rec'd PCT/PTO 20 MAY 2005

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEME	NT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Koninklijke Philips Electronics N	I.V.
Application No./Patent No.: Concurrently	Filed/Issue Date: Concurrently
Entitled: CREVICE-LESS END CLOSURE MEMBER C	OMPRISING A FEED-THROUGH
Koninklijke Philips Electronics N.V. (Name of Assignee)	a corporation (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is: 1.	st; or
2. an assignee of less than the entire right, title an The extent (by percentage) of its ownership into in the patent application/patent identified above by virtual titles.	erest is —————%
A. [] An assignment from the inventor(s) of the pater in the United States Patent and Trademark Offic attached.	nt application/patent identified above. The assignment was recorded eat Reel, Frame, or for which a copy thereof is
OR	
B. [] A chain of title from the inventor(s), of the patent below:	t application/patent identified above, to the current assignee as shown
1. From: ————————————————————————————————————	—— To:———————
The document was recorded in the Unite Reel, Frame	d States Patent and Trademark Office at, or for which a copy thereof is attached.
0.5	_
The document was recorded in the Unite	To: d States Patent and Trademark Office at
Reel, Frame	, or for which a copy thereof is attached.
3. From:	То:
From: The document was recorded in the Unite	d States Patent and Trademark Office at
Reel, Frame	, or for which a copy thereof is attached.
[] Additional documents in the chain of title	are listed on a supplemental sheet.
[] Copies of assignments or other documents in the of [NOTE: A separate copy (i.e., the original assignments be submitted to Assignment Division in accordance of the USPTO. See MPER	nent document or a true copy of the original document) rdance with 37 CFR Part 3. if the assignment is to be
The undersigned (whose title is supplied below) is auth	norized to act on hehalf of the assignee
5/6/05	·
Date	Frank Keegan, Reg. 50,145 7 Typed or printed name
(914) 333-9669	Typed of diffied frame
Telephone number	Signature
	•
	Corporate Counsel Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.